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Express Mail Mailing Label No. EV 951021905 US  
Docket No.: SNS-015DVC1  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of: Levene et al.

Application No.: Not Yet Assigned 10697548

Filing Date: Herewith

For: APPARATUS AND METHODS FOR  
TEXTURE MAPPING

Confirmation No.: Not Yet Assigned

Art Unit: Not Yet Assigned

Examiner: Not Yet Assigned

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**TRANSMITTAL OF FORMAL DRAWINGS**

Enclosed please find one set of Color Formal Drawings for filing in the above-referenced patent application - Number of Sheets: 28. These color drawings are submitted in support of, and in place of, the electronically submitted drawings filed electronically on even date herewith

Respectfully submitted,

Date: March 27, 2008  
Reg. No. 53,002

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PTO/SB/21 (10-07)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	Not Yet Assigned
	Filing Date	Herewith
	First Named Inventor	Levene
	Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	Attorney Docket Number	SNS-015DVC1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard Transmittal of Formal Drawings
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	GOODWIN PROCTER LLP		
Signature	/William R. Haulbrook/		
Printed name	William R. Haulbrook		
Date	March 27, 2008	Reg. No.	53,002